| ETITION FOR EXTENSION OF   | TIME UNDER 37   | CFR 1.136(a)  | Docket Number (Option 285-118                      | · IZI // |
|--|---|---|--|----------|
|  | In re Application of  | В   | byce et al.  |          |
|  | Application Number  | 09/610,02   | Filed 7  | /3/00 2  |
|  | For OST   | EOGENIC IMP   | LANTS DERIVED                                      | )        |
|  | Group Art Unit  | 3738  | Examiner Pellegrii                                 | no, B.E. |
| This is a request under the provisions or<br>reply in the above identified application.  |   | extend the period for   | r filing a   |          |
| The requested extension and appropriation (check time period desired):   |   | are as follows  |  |          |
| One month (37 CFR 1.17(  |   | RECEI\  | ED \$ 110  |          |
| Two months (37 CFR 1.17  Three months (37 CFR 1.17   |   | FEB 2 0 2   | \$_ <u>410</u>                                     | 0.00     |
| Four months (37 CFR 1.17   |   | TECHNOLOGY CEN  | s 1.4  | 50.00    |
| Five months (37 CFR 1.17   |   | TEOTHOLOGY OLD  | \$ <u>1,9</u>                                      | 70.00    |
| Applicant claims small entity stat above is reduced by one-half, an  |   |   | amount shown                                       |          |
| A check in the amount of the fee   | =   |   | •  |          |
|  |   |   |  |          |
| Payment by credit card. Form P   |   | ran foon in this  |  |          |
| The Commissioner has already to application to a Deposit Account.  | peen authorized to cha  |   |  |          |
| The Commissioner has already to application to a Deposit Account.  The Commissioner is hereby aut  | been authorized to cha<br>horized to charge any   | fees which may be   | required,  |          |
| The Commissioner has already to application to a Deposit Account. The Commissioner is hereby author credit any overpayment, to Del I have enclosed a duplicate copy  | peen authorized to cha<br>horized to charge any<br>eposit Account Number  | fees which may be   | required,<br>                                      |          |
| The Commissioner has already to application to a Deposit Account.  The Commissioner is hereby aut or credit any overpayment, to Del I have enclosed a duplicate copy I am the applicant/inventor   | peen authorized to cha<br>horized to charge any<br>eposit Account Number<br>of this sheet.  | fees which may be<br>04-1121  | required,<br>                                      |          |
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**CERTIFICATION UNDER 37 C.F.R. § 1.10** 

forms are submitted.

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number \_EV176144458US\_ addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Dated: \_February 12, 2003\_\_\_\_\_\_\_

Dated: \_February 12, 2003

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